P03000122405

(Re	equestor's Name)			
(Address)				
(Ac	ldress)			
(Ci	ty/State/Zip/Phone	» #)		
PICK-UP	TIAW [MAIL		
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE

T BROWN MAY 2 1 2004

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

SUBJECT:	Change of Corpo	rate Address,	Addiess of Reg. Age
DOCUMENT I	NUMBER:		· · · · · · · · · · · · · · · · · · ·
The enclosed Ar	rticles of Amendment and fee ar	e submitted for filing.	
Please return all	correspondence concerning this	matter to the following:	
_	David (Nar	ne of Person)	SSF
_	EC3		
	·	f Firm/ Company)	
	2620	Coolidge 3 (Address)	t.
		good, FL	33020-1941
F 6 4 ' C	` •	•	
For further infor	mation concerning this matter, p	please call.	
Da	uid G Polz (Name of Person)	at (954) 2 (Area Code & Da	290 - 4496 (cell) sytime Telephone Number)
Enclosed is a ch	eck for the following amount:		
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Street Address

Amendment Section

409 E. Gaines Street

Tallahassee, FL 32399

Division of Corporations

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.2 of change is submitted for a corporation organized under the laws of the State	
order to change its registered office or registered agent, or both, in the State of	
1. The name of the corporation: EC3 Inc.	
2. The principal office address: 2020 Coolidge St	
Hollywood, FL 3	3020-1941
3. The mailing address (if different):	
4. Date of incorporation/qualification: Oct 30, 2003 Document num	ther: P03000(22405
5. The name and street address of the current registered agent and registered of Florida Department of State:	
David 6 Bolz	David G. Bolz, CBSE
3705 Edgwood AR	3705 Edgewood Ave. Fort Myers, FL 33916
Ft Myers, FL 33	216
6. The name and street address of the new registered agent (if changed) and /o (if changed):	r registered office
David G. Bolz	
2620 Coolidge Stoo (P.O. Box or personal mailbox NOT acceptable)	吐 器三位
Hollywood, FL 330	2D-10A1 7 3
, , ,	
The street address of its registered office and the street address of the busine changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directly the board or the corporation has been notified in writing of the change.	tors or by an officer so authorized
David C	r typed name and title)
I hereby accept the appointment as registered agent and agree to act in this I further agree to comply with the provisions of all statutes relative to the provisions, and I am familiar with and accept the obligation of my position a document is being filed merely to reflect a change in the registered office accorporation has been notified in writing of this change.	capacity. oper and complete performance of strength of strength of this largest. Or, if this largest, I hereby confirm that the
(Signature of Registered Agent) If signing on behalf of an entity:	(Date)
(Typed or Printed Name)	(Capacity)

* * * FILING FEE: \$35.00 * * *